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Official Form 1 (1/08)	Document	Page 1 of 35	
	United States Bankruptcy (Voluntary Petition
NOI	RTHERN DISTRICT OF ILLIN	IOIS	
Name of Debtor (if individual, enter Last, First, M	Middle):	Name of Joint Debtor (Spouse)(Last, First, M	Middle):
Leinss, William S.			
All Other Names used by the Debtor in the (include married, maiden, and trade names):	last 8 years	All Other Names used by the Joint Debto (include married, maiden, and trade names):	r in the last 8 years
NONE		(
Last four digits of Soc. Sec. or Indvidual-Taxpaye (if more than one, state all): 7825	er I.D. (ITIN) No./Complete EIN	Last four digits of Soc. Sec. or Indvidual-Taxpo (if more than one, state all):	ayer I.D. (ITIN) No./Complete EIN
Street Address of Debtor (No. & Street, City	y, and State):		Street, City, and State):
330B Higgins Road			
Park Ridge IL	ZIPCODE 60068	1	ZIPCODE
County of Residence or of the		County of Residence or of the	<u> </u>
Principal Place of Business:		Principal Place of Business:	
Mailing Address of Debtor (if different from	street address):	Mailing Address of Joint Debtor (if diff	erent from street address):
P.O. Box 1151 Park Ridge IL	ZIPCODE		ZIPCODE
	60068-7151		Eli Cobe
Location of Principal Assets of Business Do (if different from street address above): NOT API	ebtor PLICABLE		ZIPCODE
(if different from street address above).			
Type of Debtor (Form of organization)	Nature of Business	Chapter of Bankruptcy	
(Check one box.)	(Check one box.)	the Petition is Filed	(Check one box)
Individual (includes Joint Debtors)	Health Care Business	Chapter 7 Chapter 9	Chapter 15 Petition for Recognition of a Foreign Main Proceeding
See Exhibit D on page 2 of this form.	Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B)	Chapter 9	
Corporation (includes LLC and LLP)	Railroad	Chapter 12	Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Partnership	Stockbroker	Chapter 13	
Other (if debtor is not one of the above entities, check this box and state type of	Commodity Broker	Nature of Debts (€ ✓ Debts are primarily consumer debts,	Check one box) defined Debts are primarily
entity below	Clearing Bank	in 11 U.S.C. § 101(8) as "incurred by	
	Other	individual primarily for a personal, f	amily,
	Tax-Exempt Entity	or household purpose"	
	(Check box, if applicable.)	Chapter 11 Debt	ors:
	Debtor is a tax-exempt organization	Debtor is a small business as defined in	11 U.S.C. 8 101(51D)
	under Title 26 of the United States Code (the Internal Revenue Code).	Debtor is not a small business debtor as	
	<u> </u>	1	
Filing Fee (Check	(cone box)	Check if:	1.11.7.12.
Full Filing Fee attached	I. to be distincted and a Mark attent	Debtor's aggregate noncontingent liqui to insiders or affiliates) are less than \$2	
Filing Fee to be paid in installments (applicable signed application for the court's consideration			
to pay fee except in installments. Rule 1006(b)). See Official Form 3A.	Check all applicable boxes:	
Filing Fee waiver requested (applicable to cha		A plan is being filed with this petition	
signed application for the court's consideration	n. See Offi cial Form 3B.	Acceptances of the plan were solicited classes of creditors, in accordance with	
Statistical/Administrative Information		classes of creations, in accordance with	THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that funds will be available	for distribution to unsecured creditors		
Debtor estimates that, after any exempt prope		paid, there will be no funds available for	
distribution to unsecured creditors.		. ,	
Estimated Number of Creditors		ппп	
1-49 50-99 100-199 200-9	99 1,000- 5,001- 10,001	1- 25,001- 50,001- Over	
Estimated Assets	5,000 10,000 25,000	50,000 100,000 100,000	
\$0 to \$50,001 to \$100,001 to \$500,	001 \$1,000,001 \$10,000,001 \$50,00	00,001 \$100,000,001 \$500,000,001 More than	
\$50,000 \$100,000 \$500,000 to \$1 millio	to \$10 to \$50 to \$10	to \$500 to \$1 billion \$1 billion	
Estimated Liabilities			
\$0 to \$50,001 to \$100,001 to \$500,		00,001 \$100,000,001 \$500,000,001 More than	
\$50,000 \$100,000 \$500,000 to \$1 million	to \$10 to \$50 to \$10		

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Official Form 1 (1/08) Document Page 2 of 35 FORM B1, Page 2

Voluntary Petition	Name of Debtor(s):		, , ,
(This page must be completed and filed in every case)	William S. Leinss		
All Prior Bankruptcy Cases Filed Within Last 8 Y			
Location Where Filed:	Case Number:	Date Filed:	
NONE		D . D'I I	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate o	of this Debtor (If more	e than one, attach additional sheet)	
Name of Debtor:	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11) Exhibit A is attached and made a part of this petition	whose I, the attorney for the petitioner have informed the petitioner the or 13 of title 11, United States (, 11, 12 ble under
Does the debtor own or have possession of any property that poses or is all or safety? Yes, and exhibit C is attached and made a part of this petition. No	Exhibit C lleged to pose a threat of imminent	and identifiable harm to public health	
(To be completed by every individual debtor. If a joint petition is filed, ea	Exhibit D ach spouse must complete and attac	rh a separate Exhibit D.)	
Exhibit D completed and signed by the debtor is attached and mad If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached.			
	Regarding the Debtor - Venue		
(Check	ck any applicable box)		
Debtor has been domiciled or has had a residence, principal place of b preceding the date of this petition or for a longer part of such 180 days		District for 180 days immediately	
There is a bankruptcy case concerning debtor's affiliate, general partners	er, or partnership pending in this D	istrict.	
Debtor is a debtor in a foreign proceeding and has its principal place of principal place of business or assets in the United States but is a defen the interests of the parties will be served in regard to the relief sought	ndant in an action proceeding [in a f		
•	o Resides as a Tenant of Resident	ial Property	
Landlord has a judgment against the debtor for possession of debtor	applicable boxes.) btor's residence. (If box checked, co	omplete the following.)	
	(Name of landlord that of	obtained judgment)	
	(Address of landlord)		
Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for possess.		•	
Debtor has included with this petition the deposit with the court period after the filing of the petition.	☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day		
Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Case 08-05513 Doc 1 Filed 03/07 Official Form 1 (1/08) Documer	
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	William S. Leinss
Si	gnatures
	gnatures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct.	I declare under penalty of perjury that the information provided in this
[If petitioner is an individual whose debts are primarily consumer debts	petition is true and correct, that I am the foreign representative of a debtor
and has chosen to file under chapter 7] I am aware that I may proceed	in a foreign proceeding, and that I am authorized to file this petition.
under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.	(Check only one box.)
[If no attorney represents me and no bankruptcy petition preparer	I request relief in accordance with chapter 15 of title 11, United States
signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b)	Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
\mathbf{X} /s/ William S. Leinss	
Signature of Debtor	X
X Signature of Joint Debtor	(Signature of Foreign Representative)
	(Printed name of Foreign Representative)
Telephone Number (if not represented by attorney)	3/ 3/2008
3/ 3/2008 Date	(Date)
Signature of Attorney*	21
X /s/ MARK D. WEISMAN	Signature of Non-Attorney Bankruptcy Petition Preparer
Signature of Attorney for Debtor(s)	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document
MARK D. WEISMAN	and the notices and information required under 11 U.S.C. §§ 110(b), 110(h).
Printed Name of Attorney for Debtor(s) MARK D. WEISMAN #2971712	and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by
MARK D. WEISMAN #29/1/12 Firm Name	bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or
100 W. Monroe	accepting any fee from the debtor, as required in that section. Official Form
Address Suite 1310	19 is attached.
Chicago IL 60603	Printed Name and title, if any, of Bankruptcy Petition Preparer
(312) 857-1320	
Telephone Number	Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal,
3/ 3/2008 Date	responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
*In a case in which \\$ 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after	by 11 0.5.C. § 110.)
an inquiry that the information in the schedules is incorrect.	Address
Signature of Debtor (Corporation/Partnership)	v
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to	X
file this petition on behalf of the debtor.	Date
The debtor requests the relief in accordance with the chapter of title	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.
11, United States Code, specified in this petition.	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is
X	not an individual.
Signature of Authorized Individual	
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11
3/ 3/2008	and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Date

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NORTHERN DIVISION

In re William S. Leinss		Case No.	
		Chapter	7
	/ Debtor		

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data"if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	Yes	1	\$ 0.00		
B-Personal Property	Yes	3	\$ 3,343.00		
C-Property Claimed as Exempt	Yes	1			
D-Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$ 71,446.60	
G-Executory Contracts and Unexpired Leases	Yes	1			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	Yes	1			\$ 1,374.00
J-Current Expenditures of Individual Debtor(s)	Yes	1			\$ 1,376.10
тот	AL	13	\$ 3,343.00	\$ 71,446.60	

/ Debtor

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NORTHERN DIVISION

In re william S. Leinss	Case No.
	Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 1,374.00
Average Expenses (from Schedule J, Line 18)	\$ 1,376.10
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$ 0.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 71,446.60
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 71,446.60

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, , , , , , , , , , , , , , , , , , , ,		Page 6 of 35

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In re William S. Leinss	Case No.
Debtor	(if known

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR			
I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information and belief.			
Date: <u>3/3/2008</u>	Signature /s/ William S. Leinss William S. Leinss		
	[If joint case, both spouses must sign.]		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NORTHERN DIVISION

n re William S. Leinss	Case No.
	Chapter 7
Debtor(s)	

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

WARNING: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.

2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not I have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Document Page 8 of 35

4. I am not required to receive a credit counseling briefing because of *[Check the applicable statement]*[Must be accompanied by a motion for determination by the court.]

Incapacity. (Defined in 11 U.S.C. § 109 (h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109 (h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

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Signature of Debtor:	/s/ William	S. Leinss
Date: 3/ 3/2008		_

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IN THE UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

N RE: William S. Leinss)
)
)
Debtor)
)

MOTION FOR THE ENTRY OF AN ORDER EXEMPTING THE DEBTOR FROM THE CREDIT COUNSELING BRIEFING AND PERSONAL FINANCIAL MANAGEMENT SEMINAR

Now comes the debtor, William S. Leinss, by his attorney, MARK D. WEISMAN and moves and moves for the entry of an order granting him an exemption from attending a credit counseling briefing and an exemption from attending a personal management seminar and in support states as follows:

- 1. As set forth in the debtor's verified voluntary petition the debtor is permanently disabled and has been receiving social security disability since 1991.
- 2. The debtor suffers from severe obsessive-compulsive disorder, recurrent major depression, posttraumatic stress syndrome, and attention deficit disorder. Appending hereto is a letter, dated February 11, 2008 from the debtor's physician, Dr. Frederick E. Miller, Chairman of the Department of Psychiatry and Behavioral Sciences at Evanston Northwestern Healthcare. The debtor's medication schedule (set forth in Dr. Miller's January 2008 letter) is also appended. As set forth in the letters, the debtor's conditions often prevent him from functioning.
- 3. The debtor has a history of bilateral neurosensory hearing loss that has existed for more than thirty years. Appended hereto is a letter from Dr. Stephen Yeh, the debtor's Otolaryngolist.

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- 4. Additionally, Dr. Michael Greer is treating the debtor for chronic spondylosis lumbosacral spine and is severally limited in his ability to walk.
- 5. The debtor does not have the ability to use a computer, and due to his conditions would be unable to meaningfully participate or benefit from either the credit counseling briefing or the financial management seminar.

WHEREFORE, the debtor prays for the entry of an Order determining that the debtor is exempt from attending or participating in a credit counseling briefing and the financial management seminar.

/s/_MARK D. WEISMAN MARK D. WEISMAN Attorney for Debtor 100 W. Monroe, Suite 1310 Chicago, IL 60603 (312) 857-1320 Atty. # 2971712



Frederick E. Miller, MD, PhD Chairman Department of Psychiatry and Behavioral Sciences 2650 Ridge / venue Evanston, Illinois 60201 (847) 570-1067 (847) 570-2939 fax fem197@northwestern.edu

February 11, 2008

RE: William S. Leinss

To Whom It May Concern:

I am writing this letter at the request of my patient, William S. Leinss, who is permanently disabled and suffers from severe obsessive-compulsive disorder, as well as recurrent major depression, posttraumatic stress syndrome, and attention deficit disorder.

When Mr. Leinss cycles into a depressive episode or experiences an exacerbation of obsessive compulsive disorders, these can be severe and prevent him from functioning.

Mr. Leinss needs to have things repeated or written down for him at all times so that he can clearly understand what is being said or what is being asked of him. Due to the severity and debilitating nature of his psychiatric neurobiological brain diseases, he is not capable of any gainful employment at this time. I do not foresee his condition changing in the near future. He has been under my care since September 1994.

Sincerely,

Frederick E. Miller, MD, PhD

Chairman

Department of Psychiatry and Behavioral Sciences

FEM/lo



Case 08-05513

January 17, 2008

Frederick F. Mil er, MD, PhD Chairman Department of Fsychiatry and Behavioral Sciences 2650 Ridge Avenue Evanston, Illinois 60201 (847) 570-1667 (847) 570-2939 fax fem197@northwestern.edu

RE: William S. Leinss

To Whom It May Concern:

I am writing this letter to clarify that William S. Leinss is permanently disabled and remains under my care. His medications include:

- Lexapro, 20 mg, Take 1 & ½ tablets daily
- 2. Xanax, 1 mg, 4 times per day
- 3. Seroquel, 200 mg, 4 tablets at bedtime
- 4. Seroquel, 25 mg, 3 tablets during the day
- 5. Adderall XR, 20 mg, one capsule in morning
- 6. Adderall XR, 10 mg, one capsule in afternoon

Additionally, Mr. Leinss' orthopedic surgeon, Dr. Michael Great, has prescribed the following medications for his permanent disabilities:

- 1. Vicodin-ES, one tablet every 4-6 hours as needed for pain
- 2. Celebrex, 200 mg, 2 capsules every morning
- 3. Flexeril, 10 mg, Take 1 tablet every 8 hours as needed.

Mr. Leinss' primary care physician, Glenbrook Clinic, has prescribed:

- 1. Protonix, 40 mg, one tablet by mouth daily
- 2. Flonase (AQ) spray 50 meg in each nostril twice daily.
- 3. Lopid, 600 mg, I tablet twice a day

Additionally, Mr. Leinss Eye physician, Glenbrook Eye Clinic has prescribed:

1. Restasis 0.05% opth emulsion 1 drop twice daily in both eyes.

Mr. Leinss' urologist and surgeon, Walter S. Falkowski, MD, FACS, prescribes various medications for chronic prostate and urological problems when needed.

- 1. Flomax, 0.4 mg, one capsule daily
- 2. Testim 1% gel 50 mg, apply each morning
- 3. Mycolog-11 cream 60 gm, use as needed

Additionally, Mr. Leinss is under the carc of otolaryngologist, Steven Yeh, MD, SC, for his serious hearing difficulties.

1. Cortisporin 1% otic solution 10 ml, instill 4 drops in affected ear three times daily as needed.

Sincerely,

Frederick E. Miller, MD, PhD

Chairman, Department of Psychiatry and Behavioral Sciences

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STEPHEN YEH, M.D., S.C.

Otolaryngology, Head & Neck Surgery

2150 PFINGSTEN ROAD CLENVIEW, ILLINO1S 60026 Telephone: 847-998-0470 Fax: 847-998-0483

12/11/'07

To Whom It May Concern:

Mr. William Leinss has history of progressive bilateral neurosensory hearing loss. This history began more than 30 years ago. More recently he has experienced an acceleration in the rate of hearing decrease. He had an audiogram today that revealed a severe neurosensory hearing loss in the right ear and a moderate hearing loss in the left ear. He is a candidate for a hearing aid in at least his left ear.

Stephen Yen, MD

encl.: Audiogram 12/11/'07

Secretary of State • State of Illinois

Filed 03/07/08
Document

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SIDE A

(To be completed by physician)

Persons with Disabilities Certification for Plates or Parking Placard

DIRECTIONS: Both sides of this document must be signed and completed. Side A must be completed by the physician. Side B must be completed by the applicant.

DEFINITION: "PERSONS WITH DISABILITIES" (625 IL.CS 5/1-159.1)

"A natural person who, as determined by a licensed physician: (1) cannot walk without the use of, or assistance from, a brace, cane, crutch, another person, prosthetic device, wheelchair, or other assistive device; (2) is restricted by lung disease to such an extent that his or her forced (respiratory) expiratory volume for one second, when measured by spirometry, is less than one liter, or the arterial oxygen tension is less than 60 mm/hg on room air at rest; (3) uses portable oxygen; (4) has a cardiac condition to the extent that the person's functional limitations are classified in severity as Class III or Class IV, according to standards set by the American Heart Association; (5) is severally limited in the person's ability to walk due to an arthritic, neurological, or orthopedic condition; (6) cannot walk 200 feet without stopping to rest because of one of the above 5 conditions."

(Please fill in the name of the person with the disability, state the diagnosis, and indicate the impairments below.) Name of Person with Disabilities NOTE: "Cannot walk 200 feet without stopping to rest" is no longer a qualifying disability unless it is related to one of the following conditions below.****** Is restricted by lung disease to such a degree that the person's forced (respiratory) expiratory volume (FEV) in one second, when measured by spirometry, is less than one liter. Uses portable oxygen. Has a Class III or Class IV cardiac condition according to the standards set by the American Heart Association. Cannot walk without the assistance of another person, prosthetic device, wheelchair, or other assistive device. Is severely limited in the person's ability to walk due to an arthritic, neurological, or orthopedic condition. W. S. .. LENGTH OF DISABILITY, Check one Disability is temporary—must state duration (maximum 6 months) (Disability is permanent I hereby certify that the physical condition of the person with disabilities listed herewith constitutes hir 1/her as a person with disabilities as described under 625 ILCS 5/1-159.1. WARNING: Any person who knowingly misuses or tas an application can be fined up to \$1,000. PHYSICIANS: Do not sign makes a false or misleading sta this form if the named paties The above definition. Physician's Name Telephone (

Please mail all required documentation to Secretary of State, Persons with Disabilities License Plate/Placard Unit, 501

South 2nd St., Room 541, Springfleid, IL 62756.

VSD-82-17

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In re william S. Leinss	, Case No
Debtor(s)	(if known)

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	HusbandH WifeW JointJ CommunityC	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
OBRA Special needs trust, life estate in real estate at 330B Higgins Road, Park Ridge, IL 60068	Life Estate		Unknown	\$ 0.00

No continuation sheets attached

0.00

TOTAL \$

(Report also on Summary of Schedules.)

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In re William S. Leinss	. Case No.
Debtor(s)	(if known

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

					Current
Type of Property	N	Description and Location of Property			Value of Debtor's Interest,
	o		Husband	н	in Property Without
	n		Wife	·w	Deducting any Secured Claim or
	е		Community		Exemption
1. Cash on hand.		Cash on hand			\$ 50.00
		Location: In debtor's possession			
Checking, savings or other financial accounts, certificates of deposit, or shares		LaSalle Checking			\$ 1,493.00
in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Location: In debtor's possession			
 Security deposits with public utilities, telephone companies, landlords, and others. 	X				
 Household goods and furnishings, including audio, video, and computer equipment. 		Miscellaneous household goods and furnishing including bed, older tv, stove, & refriger	_		\$ 500.00
		(10 years old), 1 couch, table and chairs			
		Location: In debtor's possession			
Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X				
6. Wearing apparel.		Ordinary wearing apparel			\$ 500.00
		Location: In debtor's possession			
7. Furs and jewelry.	X				
Firearms and sports, photographic, and other hobby equipment.	X				
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X				
10. Annuities. Itemize and name each issuer.	X				
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars.	X				

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In re William S. Leinss	Case No.				
Debtor(s)	(if knowr				

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

		(Continuation Sheet)			
Type of Property	N o n e	Description and Location of Property	Husband Wife- Joint Community	W J	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
(File separately the record(s) of any such					
interest(s). 11 U.S.C. 521(c).)					
Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X				
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X				
14. Interests in partnerships or joint ventures. Itemize.	X				
Government and corporate bonds and other negotiable and non-negotiable instruments.	X				
16. Accounts Receivable.	X				
Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X				
Other liquidated debts owed to debtor including tax refunds. Give particulars.	X				
Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.		Debtor is a life-estate beneficiary of a special needs trust. Upon the death of the debtor or upon the debtor ceasing to live i the property the property reverts to the Lo S. Leinss Trust. Location: In debtor's possession	n		\$ 0.00
20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.		Life Estate (See property listed under question 19) Location: In debtor's possession			\$ 0.00
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				
22. Patents, copyrights, and other intellectual property. Give particulars.	X				
23. Licenses, franchises, and other general intangibles. Give particulars.	X				
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X				

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In re William S. Leinss	. Case No.
Debtor(s)	(if knowr

SCHEDULE B-PERSONAL PROPERTY

		(Continuation Sheet)		
Type of Property	N o n e	J. Commu	ifeW intJ	Deducting any Secured Claim or Exemption
25. Automobiles, trucks, trailers and other vehicles and accessories.		1993 Grand Marquis Location: In debtor's possession		\$ 800.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	x			

Total 🖈

\$ 3,343.00

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ın	re

William S. Leinss	Case No.	
Debtor(s)	, -	(if known)

SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: Check if debtor claims a homestead exemption that exceeds \$136,875. (Check one box)

☐ 11 U.S.C. § 522(b) (2)

☑ 11 U.S.C. § 522(b) (3)

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
OBRA Special needs trust	735 ILCS 5/12-901	\$ 0.00	Unknown
Cash on hand	735 ILCS 5/12-1001(b)	\$ 50.00	\$ 50.00
LaSalle Checking	735 ILCS 5/12-1001(b)	\$ 1,493.00	\$ 1,493.00
Miscellaneous household goods	735 ILCS 5/12-1001(b)	\$ 500.00	\$ 500.00
Ordinary wearing apparel	735 ILCS 5/12-1001(a)	\$ 500.00	\$ 500.00
1993 Grand Marquis	735 ILCS 5/12-1001(c)	\$ 800.00	\$ 800.00

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B6D (Official Form 6D) (12/07)

n reWilliam S. Leinss	, Case No.	
Debtor(s)	_	(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	Co-Debtor	0' V H W- J	f Lien, and [as Incurred, Nature Description and Market Derty Subject to Lien	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecure Portion, If <i>I</i>	
Account No:										
			Value:							
Account No:										
Account No:			Value:							
			Value:							
No continuation sheets attached				S (Tota	u bto of thi			\$ 0.00	\$	0.0
				(Use only	To	otal	\$ ie)	\$ 0.00 (Report also on Summary of		0.0

Schedules.

Statistical Summary of Certain Liabilities and Related Data) B6E (Official Form 6E) (12) 67) 08-05513 Doc 1 Filed 03/07/08 Entered 03/07/08 17:12:34 Desc Main Page 21 of 35 Document

In re William S. Leinss

Debtor(s)

Case No.

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or quardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is

disp	uted, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)
	Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
prio	Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to trity listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debtort this total also on the Statistical Summary of Certain Liabilities and Related Data.
entit	Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not led to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consume ts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
\boxtimes	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYF	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

*Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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In re William S. Leinss	,	Case No.	
Debter/e)	<u></u>		

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. HHusband WWife JJoint CCommunity	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 6696 Creditor # : 1 Chase Freedom P.O. Box 15298 Wilmington DE 19850-5298	2005-2007 Credit Card Purchases medical bills and living expenses				\$ 22,369.83
Account No: 4118 Creditor # : 2 Cit Platinum Select P.O. Box 6000 The Lakes NV 89163-6000	2005-2007 Credit Card Purchases Card used for medical bills, gasoline, auto repairs and food				\$ 9,140.79
Account No: 1919 Creditor # : 3 Citi Card Box 6000 The Lakes NV 89163-6000	2005-2007 Credit Card Purchases Card used for medical bills, repairs to residence and living expenses				\$ 23,136.38
Account No: 4440 Creditor # : 4 Discover Card P.O. Box 30943 Salt Lake City UT 84130-0000	2006 Credit Card Purchases Card used for medical bills, auto repairs, gasoline, clothing and food				\$ 14,400.49
1 continuation sheets attached	 <u> </u>	Subt	ota Tota	•	\$ 69,047.49

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

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B6F (Official Form 6F) (12/07) - Cont.

In re_William S. Leinss	, Case No.

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	J	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband -Wife Joint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 8430 Creditor # : 5 ENH Medical Group c/o Van Ru Credit 1350 E. Touhy Des Plaines IL 60018			2007 Medical Bills				\$ 99.15
Account No: 8045 Creditor # : 6 Evanston Northwestern Healtcar 23056 Network Place Chicago IL 60673-1230			2008 Medical Bills				\$ 1,791.96
Account No: 0604 Creditor # : 7 Resurrection Medical 7435 W. Talcott Chicago IL 60631			2008 Medical Bills				\$ 508.00
Account No:							
Account No:							
Account No:							
Sheet No. 1 of 1 continuation sheets attached Creditors Holding Unsecured Nonpriority Claims	ached	l to s	Schedule of	Subt			\$ 2,399.11
Creations Fioliating Offisecured Montphonity Claffins			(Use only on last page of the completed Schedule F. Report also on Summar and, if applicable, on the Statistical Summary of Certain Liabilities and	y of S		ules	\$ 71,446.60

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n re William S.	Leinss	/ Debtor	Case No.	
		<u> </u>		(if known)

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☑ Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract.	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.

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n re William S.	Leinss	/ Debtor	Case No.	
		<u> </u>	-	(if known)

SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

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nre William S. Leinss	, Case No.
Debtor(s)	(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital	DEPENDENTS OF DEBTOR AND SPOUSE				
Status: Single	RELATIONSHIP(S):	AGE(S):			
EMPLOYMENT:	DEBTOR		SPO	USE	
Occupation	Unemployed				
Name of Employer					
How Long Employed					
Address of Employer					
INCOME: (Estimate of av	erage or projected monthly income at time case filed)		DEBTOR		SPOUSE
 Monthly gross wages, s Estimate monthly overt 	salary, and commissions (Prorate if not paid monthly) ime	\$ \$	0.00 0.00	\$	0.00 0.00
3. SUBTOTAL	IOTIONO	\$	0.00	\$	0.00
4. LESS PAYROLL DEDU a. Payroll taxes and s b. Insurance c. Union dues d. Other (Specify):		\$\$\$\$	0.00 0.00 0.00 0.00	\$	0.00 0.00 0.00 0.00
5. SUBTOTAL OF PAYRO	DIL DEDUCTIONS	\$	0.00	•	0.00
6. TOTAL NET MONTHL'		\$	0.00	-	0.00
7. Regular income from o8. Income from real prope9. Interest and dividends	peration of business or profession or farm (attach detailed statement) rity e or support payments payable to the debtor for the debtor's use or that	****	0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00
11. Social security or goven (Specify): Social S12. Pension or retirement13. Other monthly income (Specify):	Security Disability income	\$ \$	1,374.00 0.00	\$	0.00 0.00
(эреспу).		\$		*	
14. SUBTOTAL OF LINES	S 7 THROUGH 13	\$	1,374.00		0.00
	/ INCOME (Add amounts shown on lines 6 and 14)	\$	1,374.00	\$	0.00
	E MONTHLY INCOME: (Combine column totals		\$	1,37	4.00
from line 15; if there is	only one debtor repeat total reported on line 15)		also on Summary of So ical Summary of Certain		

Debtor is permanently disabled. Receiving social security disability income since 1991

^{17.} Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

In re William S. Leinss	, Case No.
Debtor(s)	(if known)

SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$	0.00
a. Are real estate taxes included? Yes 🔲 No 🗵		
b. Is property insurance included? Yes \Boxed No \Boxed		
2. Utilities: a. Electricity and heating fuel	\$	90.00
b. Water and sewer	\$	20.00
c. Telephone d. Other <i>cable TV</i>		74.00
Other	\$	55.00
Other	\$	0.00
	•	
3. Home maintenance (repairs and upkeep)		5.00
4. Food	\$	180.00
5. Clothing	\$	20.00
6. Laundry and dry cleaning	\$	20.00
7. Medical and dental expenses	. \$	
8. Transportation (not including car payments)	\$	100.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		0.00
a. Homeowner's or renter's		0.00
b. Life	\$	0.00
c. Health		32.34
d. Auto	\$	72.00
e. Other		0.00
Other	\$	0.00
Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other:	\$	0.00
c. Other:	\$	0.00
d. Other:	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	-1	0.00
17. Other: RE taxes	\$	237.67
Other: home insurance	<u>\$</u>	65.09 5.00
Other: Miscellaneous expenses	Ъ	5.00
18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules	\$	1,376.10
and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 16 of Schedule I	\$	1,374.00
b. Average monthly expenses from Line 18 above	\$	1,376.10
c. Monthly net income (a. minus b.)	\$	(2.10)

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Document Page 28 of 35 UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NORTHERN DIVISION

In re: William S. Leinss

Case No.

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not diclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor my also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

Year to date:\$2760 Last Year:\$17,238 Year before:\$\$16698

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3. F	ayn	nents	to	creditors	
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None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

Creditor:Only to creditors listed

herein Address:

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filingunder chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, AMOUNT OF MONEY OR
NAME OF PAYER IF OTHER THAN DEBTOR DESCRIPTION AND VALUE OF PROPERTY

Payee: MARK D. WEISMAN

Address: 100 W. Monroe

Suite 1310

Chicago, IL 60603

Date of Payment:3/3/08

Payor: William Leinss

\$801.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF

TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

Transferee:
Address:

Relationship:

02/08

Property: Sale of 1 share of stock in Northern

Indiana Public Service

Value:\$84.00

None

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a benificiary.

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filled, unless the spouses are separated and a joint petition is not filled.)

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR

DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER,

IF ANY

Institution:LaSalle Bank
Address:

Name:
Address:

insurance
papers, trust
papers and
medical
information

12/07

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

 \times

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

None

For the purpose of this question, the following definitions apply:

 \boxtimes

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar termunder an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

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None		e name and address of ntal unit to which the notice	•	·	ed notice to a governmental unit of a release	e of Hazardous Material. Indicate the
None		·	_	-	ers, under any Environmental Law, with respect of the proceeding, and the docket number.	to which the debtor is or was a party
None	a. If the		t the names,	addresses, taxpayer-ident	ification numbers, nature of the businesses, a aging executive of a corporation, partner in a	
	self-emplo the debtor If businesse	yed in a trade, profession owned 5 percent or more of the debtor is a partnershi s in which the debto	or other active of the voting or expense.	rity either full- or part-time equity securities within six y mes, addresses, taxpayer	within six years immediately preceding the covears immediately preceding the commencement identification numbers, nature of the businesses more of the voting or equity securities, within	mmencement of this case, or in which of this case s, and beginning and ending dates of al
	If businesse				identification numbers, nature of the businesser more of the voting or equity securities within	
None	b. Identify	any business listed in respo	onse to subdivis	sion a., above, that is "sing	e asset real estate" as defined in 11 U.S.C. § 101	i.
[If com	pleted by a	n individual or individua	l and spouse]			
	e under pe		ve read the a	nswers contained in the	foregoing statement of financial affairs and	any attachments thereto and that
[Date 3/	/ 3/2008	Signature of Debtor		S. Leinss	
[Date		Signature of Joint D (if any)			

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NORTHERN DIVISION

In re	William S. Lein	nss				Case No Chapter	
					/ Debtor		
	Attorney for Debtor: MA	ARK D. I	WEISMAN	<u> </u>			

STATEMENT PURSUANT TO RULE 2016(B)

The undersigned,	pursuant to	Rule 2016(b),	Bankruptcy	/ Rules,	states that:

- The undersigned is the attorney for the debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
- 3. \$ 299.00 of the filing fee in this case has been paid.
- 4. The Services rendered or to be rendered include the following:
 - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
 - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
 - c) Representation of the debtor(s) at the meeting of creditors.
- 5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and

None other

6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and

None other

7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:

None

8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:

None

Dated: 3/ 3/2008 Respectfully submitted,

X/s/ MARK D. WEISMAN

Attorney for Petitioner: MARK D. WEISMAN

MARK D. WEISMAN #2971712

100 W. Monroe Suite 1310

Chicago IL 60603

Case 08-05513 UNITED FS TO A PACT PAGE 34 of 35 NORTHERN DISTRICT OF ILLINOIS NORTHERN DIVISION

In re William S. Leinss

Case No.

	Chapter 7
	/ Debtor
Attorney for Debtor: MARK D. WEISMAN	
<u>VERIFI</u>	ICATION OF CREDITOR MATRIX
The above named Debtor(s) h	nereby verify that the attached list of creditors is true and correct to the
best of our knowledge.	
e:	/s/ William S. Leinss
·	Debtor

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Park Ridge, IL 60068-7151

MARK D. WEISMAN 100 W. Monroe Suite 1310 Chicago, IL 60603

Chase Freedom
P.O. Box 15298
Wilmington, DE 19850-5298

Cit Platinum Select P.O. Box 6000 The Lakes, NV 89163-6000

Citi Card Box 6000 The Lakes, NV 89163-6000

Discover Card
P.O. Box 30943
Salt Lake City, UT 84130-0000

ENH Medical Group c/o Van Ru Credit 1350 E. Touhy Des Plaines, IL 60018

Evanston Northwestern Healtcar 23056 Network Place Chicago, IL 60673-1230

Resurrection Medical 7435 W. Talcott Chicago, IL 60631